1. Incident Name:		2. Operational Period: (Date / Time) From: To:)	ASSIGNMENT LIST ICS 204 - EPA		
3. Branch:		4. Division/Group/Staging:						
5. Operations Personnel:			i					
ICS Position	Name		Affilia	tion		Contact # (s)		
Operations Section Chief:								
Branch Director:								
Division/Group Supervisor/STAM:			## 1					
6. Resources Assigned:			"X" indica	ates 204a att	achme	nt with additional instructions		
Strike Team/Task Force/ Resource Identifier	Leader		Contact Info. #	# of Persons		Reporting Info/Notes/Remarks		
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7. Work Assignments:								İ
8. Special Instructions:								
9. Communications (radio and	/or phone contact nu	mbers needed fo	or this assignme	ent):				
Name/Function	Radio: Freq./System/Channel		Phone			Cell/Pager		
Emergency Communications:								
10. Prepared by: (RESL) (Da	ate / Time) 11. Rev	viewed by: (PSC)	(Date / Ti	me) 12. I	Review	red by: (OPS) (Date / Tin	ne)	
ASSIGNMENT LIST ICS 204 – EPA (Rev 02/10)								

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